	*		1	Applic	ation	or£	locket Nur	nber	·					
Effective October 1, 2003 /0 790753														ļ
		•	SMALL TYPE	ENTIT	Ý	OR		THAN ENTITY						
Ľ	OTAL CLAIMS	S	2	φ	·		1	RATE	F	EE		RATE	FEE	1
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 38	5.00	OR	BASIC FEE	770.00	1
TOTAL CHARGEABLE CLAIMS			2 1/2 minus 20=		• 4			XS 9=			OR	X\$18=	72	1
IN	DEPENDENT (CLAIMS	minus 3 =		o'			X43=			OR	X86=	7	T
М	JLTIPLE DEPE	NDENT CLAIM F	PRESENT					+145=			OR	+290=		1
• 1	the difference		TOTAL	-		OR	TOTAL	8/2	卜					
CLAIMS AS AMENDED - PART II												OTHER	THAN	1
		(Column 1)	(Column 2) (Column 3)				<u>.</u>	SMALI	LENTI	TY	OR	SMALL		İ
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	TIGH	VAL		RATE	ADDI- TIONAL FEE	
	Total	. 24	Minus	-2	4	. Q		X\$ 9=	17		OR	X\$18		Ì
	Independent	1.3	Minus	***	<u> </u>	• <i>O</i>		X43=	TT		OR	X86=		l
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	++		٠.	/		ı
									\Box		OR	/290=		
			TOTA NODIT, FEI		V	ΘŔ,	YOTAL YOUT, FEE							
	·	(Column 1)		(Colum		(Column 3)								j
AMENDMENT B	•	REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADI TION FE	IAL		RATE	ADDI- TIONAL FEE	
	Total	· 26	Minus	- 2	4	• — ·		X\$ 9=			OR	X\$18=	4	
	Independent	• 3	Minus		3	·		X43=	1	٦,	OR	X86=		
	FIRST PRESE	NTATION OF MI	JETIPLE DEI	PENDENT	CLAIM	. 🗆		+145=	 	7	OR I	+290=/		
101										— `	L	TOTAL		ĺ
		A	DOIT. FEE)PI	DOM. FEEL	$\overline{}$	ŀ					
_	<u>N</u>	(Column 1)		(Cotum		(Column 3)		•			_			
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVIOL PAID FI	ER JSLY	PRESENT EXTRA		RATĘ	ADD TION FEE	AL.	l	RATE	ADDI- TIONAL FEE	
	Total	•	Minus				r	X\$ 9=		7	R	X\$18-		
¥ [Independent	•	Minus	***	•	8	┢			_	. I			
	FIRST PRESE	X43=		ᅴº	R	X86=								
+145= * If the entry in column 1 is less than the entry in column 2, write "O" in column 3.										_ º	R	+290=	4	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE ADDIT. FEE														l
· T	he "Highest Num	ber Previously Paid	For (Total or	o orace is i Independen	g is the	i a, emer "3."	foun	d in the ap	propriate	bax in	cotu	700 1.		
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Application or Docket Number